

File Name: v. County of Los Angeles
County File No.:
TPA File No.:

Dear

On (date) you were notified of a meeting on the above noted case, (or reason licensee was not notified of original meeting, e.g., because he/she was named or alleged through an amended complaint after the meeting on the above noted case was held.) It has been determined that this was a case to settle. You were also notified that the County is required to report decisions made with respect to settlements over certain threshold amounts to the appropriate licensing board, regardless of the allocation for each named or alleged employee.

This is to inform you that we will be sending a report to the licensing board on your behalf. The factor for settlement was XXX and the allocation attributed to you was XX%
Note: In those cases in which a report is sent to the licensing board, the licensing board may contact the reported individuals directly to discuss the case.

[Insert this paragraph for allocations greater than 0%.] If you disagree with the apportionment percentage, you may participate in a dispute resolution process by contacting the LACDMH Clinical Risk Management Office at 213-637-4588. Please keep in mind however, that the dispute resolution process pertains only to the apportionment percentage and not to the necessity of reporting, which must be done per regulation when an employee is named or alleged regardless of the apportionment percentage. All requests to participate in a dispute resolution process regarding the apportionment percentage must be submitted within thirty (30) business days of the date of this letter.

Should you have any questions, please contact the LACDMH Clinical Risk Management Office at 213-637-4588 or 213-639-6326.

LACDMH Policy No. 303.07, Reporting Named or Alleged Licensees to Licensing Boards is enclosed to describe the reporting process.

Sincerely,

Enclosure